	Substitute	EE DETERMINA lor Form PTO-875	TION RECOR	) information until	for use through 7/31/2006. OMB 065 fice; U.S. DEPARIMENT OF COMM ess it displays a valid OMB control in Application or Docket Number
1	CLAIMS AS FILED - P				16 645289
	(Column 1)	ART (Column 2)	0.1		
FOR BASIC FEE	NUMBER FILED	NUMBER EXTRA	SMAL	ENTITY	OR OTHER THAN SMALL ENTITY
(37 CFR 1.16(a))		HOMBEREXTRA	RATE	FEE	RAYE
TOTAL CLAIMS (J7 CFR 1.16(c))	minus 20 =			5	OR FEE
INDEPENDENT CLAIMS (37 CFR 1.16(b))		-	x s =		
	rninus J. =		X \$ =		
MULTIPLE DEPENDENT CLA	10, 011		1		OR X S =
If the difference in column 1	is less than zero, enter "O" in	Column 2	1 1 3 ===		OR + 5
	AS AMENDED - PAR		TOTAL		OR TOTAL
1 1000	A NOCO - PAR	1 11			
Color	ICOIU	mn 2) (Column 3)	Chia	,	0.7
CLA REMAI	NING HIGH	EST BER PRESENT	SMALL EN	TITY (	OTHER THAN  SMALL ENTITY
Z AFT AMENO S Total	-0	USLY EXTRA	RATE	ADDI.	BATE
137 CFR 1 161CH	Minus "20			FEE	HOMAL
Undependent DI CFR 1 16/6/1	Minus ··· 3	=	x s=	OR.	X S = FEE
EIRST PRESENTATION OF M	I HOLE LICES		x s=		
	THE DEPENDENT CLARA	J? CFR + 16(d))	+5 =	OR	X S =
			TOTAL AOO'L FEE	→ CR	TOTAL
(Column ) CLAIMS	(Column		MODE FEE	OR	ADOL FEE
REMAININ  AFTER  AMENDMEN	I NUMBER	POESCALE			
AMENOMEN TOTAL	1 00000	Y EXTRA	RATE ADI		RATE ADDI-
O DECERTIFICA	Admos	1:	FEI		TIONAL
Independent 127 CFR 1,16(b))	Almos	X	5=	OR	X S = FEE
FIRST PRESENTATION OF MULTIF	LE DEPENDENT OF	×	= .	OR	X \$ =
	CAME (D) C	FR + 16(d)) + 5	=	7 00 1	
		TOT ADD	TAL D'L FEE	-	t s =
(Column 1) CLAIMS	(Column 2)	(Column 3)		OR A	NOD'L FEE
REMAINING AFTER	HIGHEST NUMBER	PRESENT		7 -	
TOTAL	PREVIOUSLY PAID FOR	EXTRA	ATE ADDI- TIONAL		RATE . ADDI-
(37 CFR 1.16(c)) Independent	Minus	=	FEE	1 L	TIONAL
(37 CFR 1.16[b])	Minus	=   X 1	= -	OR X \$	
FIRST PRESENTATION OF MULTIPLE (	FPENDENT OF	X \$	=	OR . X s	
	CERUENT CLAIM (37 CFR )	16(d)) + \$	=		-
			1	OR + 5	, ,

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to fife (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Tradernark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.